Abstract: With all the hype around ChatGPT clinicians must exercise caution. Artificial intelligence, including large language models like ChatGPT, offer great opportunities to improve patient care and provider efficiency if well implemented in the right circumstances. However, if used carelessly they have the potential to worsen health outcomes and, worse yet, augment systemic bias thus disproportionately impacting at risk communities. In this talk we will discuss what AI is, identify practical applications and limitations of AI in healthcare, and explore the regulatory landscape (or lack thereof) to help determine the way forward.

Bio: Dr. Hron is an associate chief medical information officer at Boston Children’s Hospital and program director for the clinical informatics fellowship, which received ACGME accreditation in 2015. He is an assistant professor of Pediatrics at Harvard Medical School and board certified in pediatrics, pediatric hospital medicine and clinical informatics. He got his start in informatics as a chief resident helping lead deployment of a patient sign out tool as well as enhanced medication reconciliation. He served as lead for education and communication for six years and now directs the inpatient informatics team for physicians and advanced practice clinicians. In this role he has lead the optimization of inpatient chart review and documentation tools and helped implement an inpatient telehealth program in the setting of the COVID19 pandemic. He is also very active in graduate medical education, chairing the GME subcommittee on work intensity at Boston Children’s, serving as co-course director for the Clinical Informatics Lecture Series at Harvard Medical School and as chair-elect for the Community of Clinical Informatics Program Directors at the American Medical Informatics Association.

Educational Objectives:

1. Define large language models
2. List 3 practical applications of LLMs in healthcare
3. List 3 barriers to the use of LLMs in healthcare

Disclosure Statement: The faculty and planners have no relevant financial relationship with ineligible companies, whose primary business is producing, marketing, selling, re-selling, or distributing health care products used by or on patients.

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